

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number <i>971170</i>	
Effective October 1, 1997							
CLAIMS AS FILED - PART I							
(Column 1) (Column 2)							
FOR		NUMBER FILED		NUMBER EXTRA		SMALL ENTITY TYPE <input type="checkbox"/>	
BASIC FEE						OTHER THAN SMALL ENTITY OR <input type="checkbox"/>	
TOTAL CLAIMS		9 minus 20 =		* —		RATE <input type="checkbox"/> FEE 395.00	
INDEPENDENT CLAIMS		2 minus 3 =		* —		OR <input type="checkbox"/> x\$22= 790.00	
MULTIPLE DEPENDENT CLAIM PRESENT						OR <input type="checkbox"/> x\$11=	
* If the difference in column 1 is less than zero, enter "0" in column 2						OR <input type="checkbox"/> x41=	
OR <input type="checkbox"/> +135=						OR <input type="checkbox"/> x82=	
OR <input type="checkbox"/> TOTAL						OR <input type="checkbox"/> +270=	
OR <input type="checkbox"/> TOTAL <i>22</i>						OR <input type="checkbox"/> TOTAL <i>22</i>	
CLAIMS AS AMENDED - PART II							
(Column 1) (Column 2) (Column 3)							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		SMALL ENTITY OR <input type="checkbox"/>	
Total		* 58 Minus		** 20 = 38		OTHER THAN SMALL ENTITY OR <input type="checkbox"/> ADDITIONAL FEE	
Independent		* 2 Minus		*** 3 = —		OR <input type="checkbox"/> RATE <input type="checkbox"/> ADDITIONAL FEE <i>342</i>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						OR <input type="checkbox"/> x\$11=	
(Column 1) (Column 2) (Column 3)						OR <input type="checkbox"/> x41=	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		OR <input type="checkbox"/> RATE <input type="checkbox"/> ADDITIONAL FEE	
Total		* Minus		** =		OR <input type="checkbox"/> x\$22=	
Independent		* Minus		*** =		OR <input type="checkbox"/> x82=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						OR <input type="checkbox"/> +135=	
(Column 1) (Column 2) (Column 3)						OR <input type="checkbox"/> +270=	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		SMALL ENTITY OR <input type="checkbox"/>	
Total		* Minus		** =		OTHER THAN SMALL ENTITY OR <input type="checkbox"/> RATE <input type="checkbox"/> ADDITIONAL FEE	
Independent		* Minus		*** =		OR <input type="checkbox"/> x\$22=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						OR <input type="checkbox"/> x41=	
(Column 1) (Column 2) (Column 3)						OR <input type="checkbox"/> x82=	
*		If the entry in column 1 is less than the entry in column 2, write "0" in column 3.				OR <input type="checkbox"/> +135=	
**		If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."				TOTAL ADDIT. FEE <i>342</i>	
***		If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."				OR <input type="checkbox"/> TOTAL <i>22</i>	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.						OR <input type="checkbox"/> TOTAL ADDIT. FEE <i>22</i>	